



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1413

|   |   |                                  |   |  |                                |
|---|---|----------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/855,586  | <b>FILING DATE</b><br>05/16/2001<br><b>RULE</b>   | <b>CLASS</b><br>358              | <b>GROUP ART UNIT</b><br>2622   | <b>ATTORNEY DOCKET NO.</b><br>35.G2807 |                                |
| <b>APPLICANTS</b><br>Masahiko Tominaga, Kanagawa, JAPAN;  |   |                                  |   |  |                                |
| <b>** CONTINUING DATA *****</b>   |   |                                  |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 160311/2000 05/30/2000<br>JAPAN 137313/2001 05/08/2001  |   |                                  |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 07/12/2001</b>  |   |                                  |   |  |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met <i>allowance</i><br>Verified and <i>PKH</i><br>Acknowledged <i>Initials</i> |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>32   | <b>TOTAL CLAIMS</b><br>20              | <b>INDEPENDENT CLAIMS</b><br>6 |
| <b>ADDRESS</b><br>05514   |   |                                  |   |  |                                |
| <b>TITLE</b><br>Image forming system and device used with the same  |   |                                  |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>950   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |